

Early ACCESS



Governor's Report, February 2010

Iowa's Early Intervention System

Early ACCESS is an early intervention system for families of infants and toddlers who have or are at-risk for developmental delays. Service providers and families work together in identifying, coordinating and providing needed services and resources that will help children grow and develop.



The Iowa Council for Early ACCESS

The purpose of the Iowa Council for Early ACCESS is to advise and assist the Lead Agency (Iowa Department of Education) and to work collaboratively with partner agencies in the coordination, development, and implementation of the policies that constitute the statewide system of early intervention services.

Kelly Hancock, Chair

Early ACCESS Makes a Difference

Baseline data has been collected and analyzed regarding early childhood outcomes.

Acquisition of knowledge and skills	Did not Improve	Improved	Maintained Typical Development
2008-2009	.9%	71.7%	27.4%

State Early ACCESS Coordinator

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Making a Referral is easy, visit:

www.earlyaccessiowa.org

Impact of Detecting Hearing Loss Early



Olivia

Olivia's hearing loss was initially suspected when she failed her newborn infant hearing screening. By the time Olivia was six weeks old, she was fitted with hearing aids and a referral was made to Early ACCESS. The phone call brought Stacy, an AEA Early ACCESS Service Coordinator, into Olivia's life. She provided the family with resource information and helped conduct a comprehensive evaluation of Olivia's developmental skills.

By the age of 4 months, Olivia's hearing loss progressed to a profound level and her parents eventually chose to have bi-lateral cochlear implants for Olivia. Although Olivia's hearing improved, the family and the service team agreed that instructional goals were needed. The revised goals were supported by deaf/hard of hearing services on a weekly basis. The increased monitoring of speech and hearing comprehension allowed her teacher to find the best learning strategy for Olivia.

The progression of Olivia's speech and hearing comprehension has been remarkable. All the hard work has translated into fun and learning with her friends at school. When Olivia turned three, she transitioned to Early Childhood Special Education services. Her parents are deeply grateful for the dedication and support that the Early ACCESS team has provided.

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A four agency system. In Iowa, the system that implements the Individuals with Disabilities Education Act (IDEA 2004) Part C is referred to as Early ACCESS. It is a collaborative system of four state agencies. The four agencies (known as the Signatory Agencies) are the Iowa Department of Education, Iowa Department of Public Health, Iowa Department of Human Services, and the University of Iowa's Child Health Specialty Clinics.

Meeting Child and Family Needs

To meet child and family needs, the interagency system:

- ✓ Works together in partnership with families
- ✓ Is family centered
- ✓ Identifies needs early
- ✓ Promotes early intervention
- ✓ Promotes resources and services in settings that are most natural to families
- ✓ Respects cultural differences

Family Satisfaction with Early ACCESS

Every year, families complete a survey regarding Early ACCESS Services. According to the survey results, a majority of families report that early intervention services are helpful.

Family Survey Measure	Percent of Impact
Parents can effectively talk about their child's needs	95.97
Parents know how to help their child develop and learn	95.82

Source for all data used in this report: *Iowa Department of Education, Annual Performance Report, IDEA Part C, February 1, 2010.*

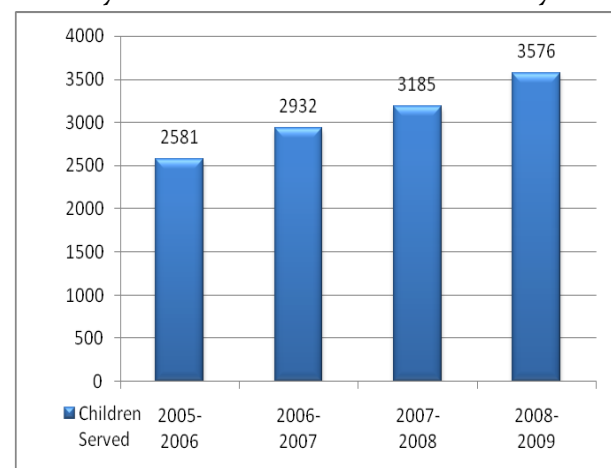
Area Education Agency Services to Infants and Toddlers Increase

Everyone has heard the expression, "It takes a village to raise a child." Early ACCESS is like a village for children with special needs and their families. It may take services from multiple agencies to meet all the needs of children and their families.

Educational services are provided by regional grantees, Area Education Agencies (AEA). As Early ACCESS Regional Grantees AEAs are responsible for ensuring that all children, birth to age three, who may be eligible for Early ACCESS, are located, identified and referred for evaluation.

The AEAs and local partners from public health, medical services and child welfare have collaborated to serve more children each of the last four years.

Early ACCESS Numbers Increase Yearly



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Public Health Service Coordinators Address Lead Poisoning Needs

Federal and state funds of Early ACCESS helped the Iowa Department of Public Health provide Early ACCESS service coordination for children referred with lead poisoning. It is important to identify these children because Iowa has four times the national average of lead poisoning in young children.

Children with Lead Poisoning	2007-08	2008-09
New Referrals	55	56
Intervention Services	36	31

Number of Services for Children at High Medical Risk Doubles

Hospitals and high risk infant follow-up programs increased the number of Early ACCESS referrals for children birth to one-year-old. State funding to Child Health Specialty Clinics helped to more than double the number of medically at-risk infants and toddlers served.

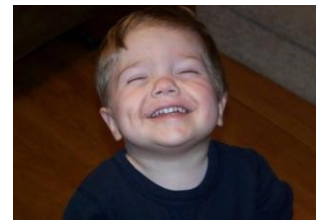
At-Risk Condition	2007-08	2008-09
Premature	51	79
Medically Complex	32	68
Drug Exposed	19	53
Other	10	37
Total	112	237

State Funds Impact Needed Nutrition Services

Good nutrition is vital for growth and learning. Early ACCESS state funds supported increased access to the specialized services of a nutritionist.

Nutrition Services	2007-08	2008-09
New Referrals	65	215
Intervention Services	48	131

Child Health Specialty Clinic Services Help Children Born Prematurely



Kaden

Kaden loves to chase his new little brother, Karsen, around the house. A simple act of play for which parents John and Nicki have patiently worked and waited. Kaden, now 30 months old, was born prematurely at 26 weeks gestation. After 115 days in intensive care he came home.

Kaden suffered from chronic lung disease and needed the assistance of oxygen and an apnea monitor. A nurse, who works at Child Health Specialty Clinics (CHSC), began seeing Kaden when he was five months old to monitor his growth and development and provide his parents with health information specific to his high-risk diagnosis. She also referred the family to Early ACCESS. Kaden had significant delays in all areas of development.

An Individualized Family Service Plan (IFSP) was implemented to set goals and begin services for Kaden and his family. Services were provided by CHSC and the Area Education Agency. His service providers included an early childhood teacher, a physical therapist, an occupational therapist and eventually a speech-language pathologist. This team of IFSP professionals, working from several community agencies, are helping Kaden meet his developmental milestones one at a time.

“Without the help of our wonderful team, Kaden would not be where he is today,” said Nicki. “Everyone is so helpful and understanding to his needs, they are a part of our family and not enough thanks can be said.”

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Early Intervention for Children at Risk



Patron

Patron tested positive for drugs when he was born. His mother had abandoned him at the hospital and refused the services DHS offered. His father, Edwin, did not know he had a son until the Department of Human Services called him. Edwin and Patron's mother were both addicted to drugs.

Fortunately for Patron and his family, the court that heard his case was participating in an innovative project called Court Teams for Change. In exchange for a voluntary agreement to cooperate with the court, parents and children are quickly connected to needed services like Early ACCESS.

In this case, the court terminated his mother's parental rights and allowed Patron to live with Edwin and his girlfriend, Terie. Due to drug exposure and being born premature, Patron was delayed in his development and he had some feeding difficulties. The Early ACCESS service coordinator and the physical therapist were able to provide helpful advice on how to give Patron the care and support he needed.

The service coordinator also supported Edwin and Terie by attending the court hearings and letting the judge know how hard they were working with Early ACCESS to learn how to parent Patron. Even when Edwin had a relapse, he learned to keep trying and continued working with the team.

Edwin said that he did not feel judged for his mistakes. Instead, the focus was on helping him understand what he needed to do to help Patron learn and grow. Edwin said that without Early ACCESS, he did not know if he would have been able to keep his son. Today, Patron no longer shows any developmental delays and his court case is closed.

However, Edwin and Terie are not done with Early ACCESS. They are raising a nephew who tested positive for drug exposure. Because of their prior successful experience, they contacted Early ACCESS immediately.

Services Increase to Infants and Toddlers Who Have Been Abused

Early ACCESS is required by law (IDEA-2004) to assure that children who were abused or neglected and eligible for Early ACCESS Services are identified. The Department of Human Services reported an increase in Early ACCESS services being provided for children who have been abused and neglected and for children in foster care for each of the last three years.

